



SAULT STE. MARIE POLICE SERVICE
DATA ENTRY GUIDE

FRAUDULENT DOCUMENT REPORT

OCCURRENCE #:	TASK #:
AUTHOR: (DICTATING OFFICER)	REPORT TIME:
ENTERED BY: (TRANSCRIBER)	ENTERED TIME: (DEFAULTS TO PRESENT TIME)
REMARKS:	
VICTIM NAME:	VICTIM TYPE:

REASON FOR REPORT:

<input type="checkbox"/> ACCOUNT CLOSED	<input type="checkbox"/> ENDORSEMENT FORGED	<input type="checkbox"/> SIGNATURE FORGED
<input type="checkbox"/> AMOUNT RAISED	<input type="checkbox"/> NO ACCOUNT	<input type="checkbox"/> STOLEN
<input type="checkbox"/> CERTIFICATE FORGED	<input type="checkbox"/> NON-SUFFICIENT FUNDS	<input type="checkbox"/> OTHER (CLARIFY)

DOCUMENT TYPE:

<input type="checkbox"/> COMPANY CHEQUE	<input type="checkbox"/> INVOICE	<input type="checkbox"/> SALES DRAFT
<input type="checkbox"/> COUNTER CHEQUE	<input type="checkbox"/> MONEY ORDER	<input type="checkbox"/> TRAVELLER'S CHEQUE
<input type="checkbox"/> CREDIT CARD	<input type="checkbox"/> PAYROLL CHEQUE	<input type="checkbox"/> OTHER (CLARIFY)
<input type="checkbox"/> GOVERNMENT CHEQUE	<input type="checkbox"/> PERSONAL CHEQUE	

DATE:	
ISSUED BY: (BANK)	BRANCH:
ACCT/DOC #:	DOC SEQ #:
PAYABLE TO:	SIGNED BY:
VALUE:	CASH REC'D:
WRITTEN BY COMPLAINANT:	WRITTEN BY SUSPECT:

IDENTIFICATION USED:

DRIVERS LICENCE #:		PROVINCE:	
VEHICLE LICENCE #:		VEHICLE PROVINCE:	
MAKE:	MODEL:	COLOR:	
CARD TYPE:		ISSUED BY:	
CARD #:		TEL:	

NARRATIVE:

(TRANSCRIBE FRAUDULENT DOCUMENT REPORT NARRATIVE AS DICTATED)